

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Katie Dean For Congress

ADDRESS (number and street)

PO Box 653



Check if different than previously reported. (ACC)

Swannanoa

NC

28778

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C

C00776252

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

STATE ▼ DISTRICT

NC

11

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the State of

(c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y

04

D D / Y Y Y Y

01

Y Y Y Y

2021

through

M M / D D / Y Y Y Y

06

D D / Y Y Y Y

30

Y Y Y Y

2021

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Page, Avery, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Page, Avery, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y

07

D D / Y Y Y Y

15

Y Y Y Y

2021

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office  
Use  
Only**FEC FORM 3**  
(Revised 05/2016)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 2 / 15

Write or Type Committee Name  
**Katie Dean For Congress**

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	2	1

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	1

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	24948.17	24948.17
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	24948.17	24948.17
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	8447.40	8447.40
(b) Total Offsets to Operating Expenditures (from Line 14) .....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	8447.40	8447.40
8. Cash on Hand at Close of Reporting Period (from Line 27) .....	16500.77	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

## For further information contact:

Federal Election Commission  
 999 E Street, NW  
 Washington, DC 20463

Toll Free 800-424-9530  
 Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

PAGE 3 / 15

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

Katie Dean For Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	2	1

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	1

**I. RECEIPTS**
**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date
**11. CONTRIBUTIONS (other than loans) FROM:****(a) Individuals/Persons Other Than Political Committees**

(i) Itemized (use Schedule A).....

13375.00

13375.00

(ii) Unitemized.....

6573.17

6573.17

(iii) TOTAL of contributions from individuals ▶

19948.17

19948.17

**(b) Political Party Committees.....**

0.00

0.00

**(c) Other Political Committees (such as PACs).....**

0.00

0.00

**(d) The Candidate.....**

5000.00

5000.00

**(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..**

24948.17

24948.17

**12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....**

0.00

0.00

**13. LOANS:****(a) Made or Guaranteed by the Candidate.....**

0.00

0.00

**(b) All Other Loans.....**

0.00

0.00

**(c) TOTAL LOANS (add Lines 13(a) and (b)).....**

0.00

0.00

**14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....**

0.00

0.00

**15. OTHER RECEIPTS (Dividends, Interest, etc.) .....**

0.00

0.00

**16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶**

24948.17

24948.17

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 15

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	8447.40	8447.40
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	8447.40	8447.40

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	24948.17
25. SUBTOTAL (add Line 23 and Line 24).....	24948.17
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	8447.40
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	16500.77

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 5 OF 15

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Katie Dean For Congress**

Full Name (Last, First, Middle Initial)

**A. Bergey, Erin, , ,**

Mailing Address 7 Scottdale Dr.

City

Asheville

State

NC

Zip Code

28806

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Providence Medical Group

Occupation

Nurse Anesthetist

Receipt For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 29 2021

Transaction ID : SA11AI.4147

Amount of Each Receipt this Period

250.00

☐ Memo Item  
Check

Full Name (Last, First, Middle Initial)

**B. Coleman, Katherine, , ,**

Mailing Address 855 Rucker Rd.

City

Alpharetta

State

GA

Zip Code

30004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 08 2021

Transaction ID : SA11AI.4264

Amount of Each Receipt this Period

75.00

☐ Memo Item  
Credit Card via ActBlue

Full Name (Last, First, Middle Initial)

**C. Fields, Richard, , ,**

Mailing Address 1705 Auburndale Ave

City

Chattanooga

State

TN

Zip Code

37405

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 12 2021

Transaction ID : SA11AI.4301

Amount of Each Receipt this Period

500.00

☐ Memo Item  
Check

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

825.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 OF 15

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**Katie Dean For Congress**

Full Name (Last, First, Middle Initial)

**A. Harjes, Christopher, , ,**

Mailing Address 273 Foxcroft Dr.

City  
Asheville

State  
NC

Zip Code  
28806

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Dependable House Buyer

Occupation  
Owner

Receipt For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 14 2021

Transaction ID : SA11AI.4107

Amount of Each Receipt this Period

2800.00

☐ Memo Item  
Check

Full Name (Last, First, Middle Initial)

**B. Jackson, Elizabeth, , ,**

Mailing Address 66 S Broad St.

City  
Brevard

State  
NC

Zip Code  
28712

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Riveter

Occupation  
Owner

Receipt For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 19 2021

Transaction ID : SA11AI.4127

Amount of Each Receipt this Period

1500.00

☐ Memo Item  
Check

Full Name (Last, First, Middle Initial)

**C. Lotane, Alissa, , ,**

Mailing Address 1213 Halifax Ct.

City  
Tallahassee

State  
FL

Zip Code  
32308

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 12 2021

Transaction ID : SA11AI.4105

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
Check

**SUBTOTAL** of Receipts This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

5300.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Katie Dean For Congress

Full Name (Last, First, Middle Initial)

Lotane, Robert, , ,

A.

Mailing Address 1213 Halifax Ct.

City

Tallahassee

State

FL

Zip Code

32308

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 12 2021

Transaction ID : SA11AI.4161

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
Check

Full Name (Last, First, Middle Initial)

Mark Leet Photography

B.

Mailing Address 736 South Mills River Rd.

City

Mills River

State

NC

Zip Code

28759

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 12 2021

Transaction ID : SA11AI.4373

Amount of Each Receipt this Period

1500.00

☐ Memo Item  
In-kind - Campaign photos for website and promo materials

Full Name (Last, First, Middle Initial)

Prickett, Dixie Marree, , ,

C.

Mailing Address 15 Dog Hobble Ln

City

Arden

State

NC

Zip Code

28704

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Patagonia

Occupation

Sales Rep

Receipt For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 22 2021

Transaction ID : SA11AI.4305

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
Check

**SUBTOTAL** of Receipts This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

3500.00

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB  
.

Form/Schedule: SA11AI

Transaction ID : SA11AI.4161

This check was refunded to Robert Lotane as we noticed that the check was signed by his wife, and not Robert.

Form/Schedule:

Transaction ID:



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 9 OF 15

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Katie Dean For Congress

Full Name (Last, First, Middle Initial)

A. Przybysz, Deborah, , ,

Mailing Address 4700 Florida Ave

City

Chattanooga

State

TN

Zip Code

37409

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Keller Williams Realty

Occupation

Realtor

Receipt For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 20 / 2021

Transaction ID : SA11AI.4198

Amount of Each Receipt this Period

250.00

☐ Memo Item  
Credit Card via ActBlue

Full Name (Last, First, Middle Initial)

B. Steed, Nell, , ,

Mailing Address 749 Whites Lake Blvd.

City

Saluda

State

NC

Zip Code

28773

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SRHS

Occupation

Physician

Receipt For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 04 / 2021

Transaction ID : SA11AI.4155

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
Check

Full Name (Last, First, Middle Initial)

C. Tennant, Michelle, , ,

Mailing Address 3315 Spartanburg Highway

City

Flat Rock

State

SC

Zip Code

28731

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Wasabi Publicity Inc.

Occupation

Publicist

Receipt For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 17 / 2021

Transaction ID : SA11AI.4185

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
Credit Card via ActBlue

**SUBTOTAL** of Receipts This Page (optional)..... ▶

2250.00

**TOTAL** This Period (last page this line number only)..... ▶

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 10 OF 15

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Katie Dean For Congress

Full Name (Last, First, Middle Initial)

Westbrook, Barbara, , ,

A.

Mailing Address 929 Woods Road

City

Clayton

State

GA

Zip Code

30525

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Unemployed

Occupation

Unemployed

Receipt For: 2022

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 17 2021

Transaction ID : SA11AI.4194

Amount of Each Receipt this Period

500.00

☐

Memo Item

Credit Card via ActBlue

Full Name (Last, First, Middle Initial)

Worley, Ginny, , ,

B.

Mailing Address 148 Marion Street NE

City

Aiken

State

SC

Zip Code

29801

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Freelance Horse Professional

Occupation

Farm Sitting

Receipt For: 2022

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 26 2021

Transaction ID : SA11AI.4367

Amount of Each Receipt this Period

1000.00

☐

Memo Item

In-kind - Initial website design and set-up for campaign

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶

1500.00

**TOTAL** This Period (last page this line number only)..... ▶

13375.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 11 OF 15

☐ 11a ☐ 11b ☐ 11c ☒ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Katie Dean For Congress**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Dean, Katherine, , ,</b> Mailing Address 114 A North Lane  <div style="display: flex; justify-content: space-between;"> <div>City Swannanoa</div> <div>State NC</div> <div>Zip Code 28778</div> </div> <div style="display: flex; justify-content: space-between;"> <div>FEC ID number of contributing federal political committee.</div> <div><b>C</b> H2NC11171</div> </div> <div style="display: flex; justify-content: space-between;"> <div>           Name of Employer Katie Dean For Congress            Receipt For: 2022  <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </div> <div>           Occupation Candidate            Election Cycle-to-Date ▼  <div style="border: 1px solid black; padding: 2px; text-align: right;">5105.00</div> </div> </div>			Date of Receipt <div style="display: flex; justify-content: space-around;"> <div>M M / D D / Y Y Y Y Y Y 06   29   2021</div> </div> <b>Transaction ID : SA11D.4315</b>  Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">5000.00</div> <input type="checkbox"/> Memo Item <input type="checkbox"/> Check	
<b>B.</b> Full Name (Last, First, Middle Initial)  Mailing Address  <div style="display: flex; justify-content: space-between;"> <div>City</div> <div>State</div> <div>Zip Code</div> </div> <div style="display: flex; justify-content: space-between;"> <div>FEC ID number of contributing federal political committee.</div> <div><b>C</b></div> </div> <div style="display: flex; justify-content: space-between;"> <div>           Name of Employer            Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </div> <div>           Occupation            Election Cycle-to-Date ▼  <div style="border: 1px solid black; padding: 2px; text-align: right;"></div> </div> </div>			Date of Receipt <div style="display: flex; justify-content: space-around;"> <div>M M / D D / Y Y Y Y Y Y</div> </div> Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;"></div> <input type="checkbox"/> Memo Item	
<b>C.</b> Full Name (Last, First, Middle Initial)  Mailing Address  <div style="display: flex; justify-content: space-between;"> <div>City</div> <div>State</div> <div>Zip Code</div> </div> <div style="display: flex; justify-content: space-between;"> <div>FEC ID number of contributing federal political committee.</div> <div><b>C</b></div> </div> <div style="display: flex; justify-content: space-between;"> <div>           Name of Employer            Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </div> <div>           Occupation            Election Cycle-to-Date ▼  <div style="border: 1px solid black; padding: 2px; text-align: right;"></div> </div> </div>			Date of Receipt <div style="display: flex; justify-content: space-around;"> <div>M M / D D / Y Y Y Y Y Y</div> </div> Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;"></div> <input type="checkbox"/> Memo Item	
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			<div style="border: 1px solid black; padding: 2px; text-align: right;">5000.00</div>	
<b>TOTAL</b> This Period (last page this line number only)..... ▶			<div style="border: 1px solid black; padding: 2px; text-align: right;">5000.00</div>	

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 12 OF 15

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Katie Dean For Congress

Full Name (Last, First, Middle Initial)

**A. ActBlue**

Mailing Address PO Box 441146

City  
SomervilleState  
MAZip Code  
02144-0031Purpose of Disbursement  
Weekly Credit Card Fee (3.95%)

003

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	3		2	0	2	1

FEC Identification Number

C

Amount of Each Disbursement this Period

84.43

Transaction ID : SB17.4383

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ActBlue**

Mailing Address PO Box 441146

City  
SomervilleState  
MAZip Code  
02144-0031Purpose of Disbursement  
Weekly Credit Card Fee (3.95%)

003

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	0		2	0	2	1

FEC Identification Number

C

Amount of Each Disbursement this Period

3.96

Transaction ID : SB17.4384

☐ Memo Item

Full Name (Last, First, Middle Initial)

**c. AK Designs**

Mailing Address 1120 SE Gatewood Place

City  
BendState  
ORZip Code  
97702Purpose of Disbursement  
Campaign logo design

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	0		2	0	2	1

FEC Identification Number

C

Amount of Each Disbursement this Period

2200.00

Transaction ID : SB17.4370

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

2288.39

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 13 OF 15

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Katie Dean For Congress

Full Name (Last, First, Middle Initial)

**A. HENCO**

Mailing Address 1445 Merrimon Ave

City  
AshevilleState  
NCZip Code  
28804Purpose of Disbursement  
Paper Products and Stickers for Campaign

004

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	7		2	0	2	1

FEC Identification Number

C

Amount of Each Disbursement this Period

404.11

Transaction ID : SB17.4330

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. HENCO**

Mailing Address 1445 Merrimon Ave

City  
AshevilleState  
NCZip Code  
28804Purpose of Disbursement  
Campaign Business Cards

004

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	8		2	0	2	1

FEC Identification Number

C

Amount of Each Disbursement this Period

107.00

Transaction ID : SB17.4345

☐ Memo Item

Full Name (Last, First, Middle Initial)

**c. Mark Leet Photography**

Mailing Address 736 South Mills River Rd.

City  
Mills RiverState  
NCZip Code  
28759Purpose of Disbursement  
In-kind - Campaign photos for website and promo materials

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	2		2	0	2	1

FEC Identification Number

C

Amount of Each Disbursement this Period

1500.00

Transaction ID : SB17.4375

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

2011.11

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 14 OF 15

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Katie Dean For Congress

Full Name (Last, First, Middle Initial)

**A. McCully, Casey, , ,**

Mailing Address 120 Shelburne Rd

City  
AshevilleState  
NCZip Code  
28806Purpose of Disbursement  
PO Box Transfer Fee Reimbursement

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		25		2021

FEC Identification Number

C

Amount of Each Disbursement this Period

67.00

Transaction ID : SB17.4363

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Page, Avery, , ,**

Mailing Address 1717 Asheville Springs Cir

City  
AshevilleState  
NCZip Code  
28806Purpose of Disbursement  
Bi-Weekly Treasurer Pay

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		18		2021

FEC Identification Number

C

Amount of Each Disbursement this Period

437.50

Transaction ID : SB17.4340

☐ Memo Item

Full Name (Last, First, Middle Initial)

**c. Page, Avery, , ,**

Mailing Address 1717 Asheville Springs Cir

City  
AshevilleState  
NCZip Code  
28806Purpose of Disbursement  
Bi-Weekly Treasurer Pay

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		29		2021

FEC Identification Number

C

Amount of Each Disbursement this Period

525.00

Transaction ID : SB17.4344

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1029.50

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 15 OF 15

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Katie Dean For Congress

Full Name (Last, First, Middle Initial)

**A. Thomas C. Webb**

Mailing Address 517 Kings Creek Rd.

City  
BrevardState  
NCZip Code  
28712Purpose of Disbursement  
Filming and production of campaign commercial

004

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
06	09	2021

FEC Identification Number

C

Amount of Each Disbursement this Period

1125.00

Transaction ID : SB17.4376

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Worley, Ginny, , ,**

Mailing Address 148 Marion Street NE

City  
AikenState  
SCZip Code  
29801Purpose of Disbursement  
In-kind - Initial website design and set-up for campaignCategory/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
06	26	2021

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.4369

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

2125.00

**TOTAL** This Period (last page this line number only).....▶

7454.00